PART B - FEE(S) TRANSMITTAL gether with applicable fee(s), to: Mail Complete and send this form Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 NOV 0 8-2004 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000 INSTRUCTIONS This form should appropriate. All further the properties of distribution of distributions are shown or distributions. e used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where of directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 10/20/2004 James W. Badie, Esq. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. Stoll, Miskin, Hoffman & Badie The Empire State Building 350 Fifth Avenue, Suite 6110 Nancy New York, NY 10118 11/09/2004 GWORDUF2 00000019 10037526 Soto (Depositor's name) (Signature 685.00 OP (Date) 02 FC:1504 FIRST NAMED INVENTOR APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. CONFIRMATION NO. 10/037,526 01/04/2002 Harold Mermelstein JWB-2001-1-P 7302 TITLE OF INVENTION: COMPOSITION AND METHOD FOR TREATMENT OF VAGINAL DRYNESS SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE nonprovisional YES \$685 \$300 \$985 01/21/2005 ART UNIT CLASS-SUBCLASS **EXAMINER** HOWARD, SHARON LEE 1615 424-434000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☑ Change of correspondence address (or Change of Correspondence? Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a $\frac{2}{3}$ registered attorney or agent) and the names of up to $\frac{2}{3}$ registered patent attorneys or agents. If no name is $\frac{2}{3}$ listed, no name will be printed. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Please check the appropriate assignce category or categories (will not be printed on the patent): 🗖 Individual 📮 Corporation or other private group entity 📮 Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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